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FACSIMILE TRANSMISSION COVER SHEET

TO: Jake Davis
FAX NO.: 703-872-9306
FROM: Jennifer Moore, Assistant to Don Bulson
DATE: August 30, 2004
RE: U.S. Application No. 10/001,952
OUR REF: SCHWP0154US
PAGES SENT (Including cover sheet): 3

MESSAGE

Dear Mr. Davis:

Attached is our response to the restriction requirement of February 13, 2004 and a copy of the return postcard showing that it was timely filed.

Please let me know if you need anything further.

Sincerely,
Jenn Moore

CONFIDENTIALITY NOTE

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AUG 30 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re PATENT application of:

Applicant: Stefan Vilsmeier et al.
Serial No: 10/001,952
Filing Date: October 31, 2001
Title: FIXING DEVICE

Examiner: Daniel J. Davis
Art Unit: 3731

Docket No. SCHWP0154US

REPLY TO OFFICE ACTION DATED FEBRUARY 13, 2004

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the restriction requirement, applicant elects Species I, Figs. 1-3.

Claims 1-16 read on the elected species.

Respectfully submitted,

RENNER, OTTO, BOISSELLE & SKLAR, LLP

By


Don W. Bulson

Registration No. 28,192

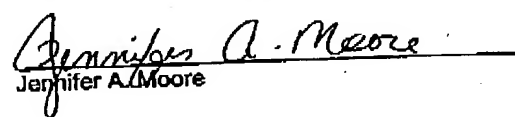
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Cleveland, Ohio 44116
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CERTIFICATE OF MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence (along with any paper referenced as being attached or enclosed) is being deposited on the below date with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date:

2-27-04


Jennifer A. Moore

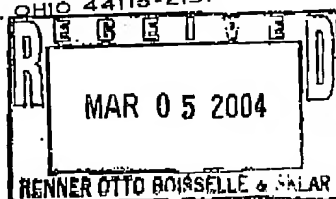
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AUG 30 2004



RENNER, OTTO, BOISSELLE & SKLAR, LLP
1621 EUCLID AVENUE, NINETEENTH FLOOR
CLEVELAND, OHIO 44115-2191



Applicant <u>Vilameier et al.</u>	Case No. <u>SCHN015408</u>
Serial No. <u>10/001, 952</u>	Filing Date <u>10/31/01</u> Atty <u>DWB</u>
Title <u>fixing device</u>	Ex. Mail No. _____
Mailed <u>2/27/04</u>	Due Date <u>3/13/04</u>
<input type="checkbox"/> Patent Application (<input type="checkbox"/> New <input type="checkbox"/> CON <input type="checkbox"/> DIV <input type="checkbox"/> CIP <input type="checkbox"/> CPA <input type="checkbox"/> PCT <input type="checkbox"/> Provisional)	
<input type="checkbox"/> Transmittal/Request	<input type="checkbox"/> Declaration/Power of Atty
<input type="checkbox"/> Pages of Specification	<input type="checkbox"/> Assignment & Cover Sheet
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<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> IDS/1449/Refs.
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